RUSK COUNTY MEMORIAL HOSPITAL NH

900 COLLEGE AVE WEST

LADYSMITH	54848	Phone: (715) 532-5561		Ownership:	County
Operated from	1/1 To 12/31	Days of Operation:	366	Highest Level License:	Skilled
Operate in Con	junction with	Hospital?	Yes	Operate in Conjunction with CBRF?	No
Number of Beds	Set Up and St	caffed (12/31/04):	96	Title 18 (Medicare) Certified?	Yes
Total Licensed	Bed Capacity	(12/31/04):	96	Title 19 (Medicaid) Certified?	Yes
Number of Resi	dents on 12/31	1/04:	88	Average Daily Census:	86

Services Provided to Non-Residents	Age, Gender, and Primary Di	Length of Stay (12/31/04)	%				
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	29.5
Supp. Home Care-Personal Care	No					1 - 4 Years	50.0
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	3.4	More Than 4 Years	20.5
Day Services	No	Mental Illness (Org./Psy)	47.7	65 - 74	5.7		
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	25.0		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	56.8	*********	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	4.5	95 & Over	9.1	Full-Time Equivalent	
Congregate Meals	No	Cancer	2.3			Nursing Staff per 100 Res	idents
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/04)	
Other Meals	No	Cardiovascular	1.1	65 & Over	96.6		
Transportation	No	Cerebrovascular	5.7			RNs	15.2
Referral Service	No	Diabetes	2.3	Gender	%	LPNs	3.1
Other Services	No	Respiratory	2.3			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	34.1	Male	33.0	Aides, & Orderlies	52.3
Mentally Ill	No			Female	67.0		
Provide Day Programming for			100.0	İ			
Developmentally Disabled	No		ale ale ale ale ale ale ale		100.0		

Method of Reimbursement

		Medicare 'itle 18			Medicaid 'itle 19			Other		Ī	Private Pay	2		amily Care			anaged Care	<u>l</u>		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	2	2.7	135	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	2.3
Skilled Care	4	100.0	450	68	93.2	115	0	0.0	0	10	90.9	135	0	0.0	0	0	0.0	0	82	93.2
Intermediate				3	4.1	95	0	0.0	0	1	9.1	135	0	0.0	0	0	0.0	0	4	4.5
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt O	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	4	100.0		73	100.0		0	0.0		11	100.0		0	0.0		0	0.0		88	100.0

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Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services,	and Activities as of 12/	31/04
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	1.9	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health		Bathing	8.0		85.2	6.8	88
Other Nursing Homes	7.7	Dressing	8.0		86.4	5.7	88
Acute Care Hospitals	25.0	Transferring	29.5		52.3	18.2	88
Psych. HospMR/DD Facilities	0.0	Toilet Use	15.9		77.3	6.8	88
Rehabilitation Hospitals	0.0	Eating	51.1		39.8	9.1	88
Other Locations	46.2	******	******	*****	*****	********	* * * * * * * *
Total Number of Admissions	52	Continence		용	Special Treat	ments	8
Percent Discharges To:		Indwelling Or Extern	nal Catheter	10.2	Receiving Re	espiratory Care	13.6
Private Home/No Home Health	1.9	Occ/Freq. Incontiner	nt of Bladder	65.9	Receiving T	racheostomy Care	0.0
Private Home/With Home Health	25.0	Occ/Freq. Incontiner	nt of Bowel	31.8	Receiving St	uctioning	1.1
Other Nursing Homes	1.9	İ			Receiving O	stomy Care	1.1
Acute Care Hospitals	11.5	Mobility			Receiving To	ube Feeding	1.1
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	3.4	Receiving Me	echanically Altered Diets	36.4
Rehabilitation Hospitals	0.0	<u> </u>					
Other Locations	1.9	Skin Care			Other Resident	t Characteristics	
Deaths	57.7	With Pressure Sores		4.5	Have Advance	e Directives	46.6
Total Number of Discharges		With Rashes		3.4	Medications		
(Including Deaths)	52	İ			Receiving Pa	sychoactive Drugs	0.0

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	This	Other	Hospital-	I	A11
	Facility	Based F	acilities	Faci	ilties
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	89.6	91.7	0.98	88.8	1.01
Current Residents from In-County	87.5	85.3	1.03	77.4	1.13
Admissions from In-County, Still Residing	40.4	14.1	2.87	19.4	2.08
Admissions/Average Daily Census	60.5	213.7	0.28	146.5	0.41
Discharges/Average Daily Census	60.5	214.9	0.28	148.0	0.41
Discharges To Private Residence/Average Daily Census	16.3	119.8	0.14	66.9	0.24
Residents Receiving Skilled Care	95.5	96.2	0.99	89.9	1.06
Residents Aged 65 and Older	96.6	90.7	1.06	87.9	1.10
Title 19 (Medicaid) Funded Residents	83.0	66.8	1.24	66.1	1.26
Private Pay Funded Residents	12.5	22.6	0.55	20.6	0.61
Developmentally Disabled Residents	0.0	1.4	0.00	6.0	0.00
Mentally Ill Residents	47.7	32.7	1.46	33.6	1.42
General Medical Service Residents	34.1	22.0	1.55	21.1	1.62
Impaired ADL (Mean)*	43.6	49.1	0.89	49.4	0.88
Psychological Problems	0.0	53.5	0.00	57.7	0.00
Nursing Care Required (Mean)*	7.7	7.4	1.04	7.4	1.03